Datapoint

Information from the Division of Health Care Finance and Policy
Massachusetts Acute Care Hospital Inpatient Discharges
Full Year Comparison FY98 (10/01/97–09/30/98) versus FY99 (10/01/98–09/30/99)

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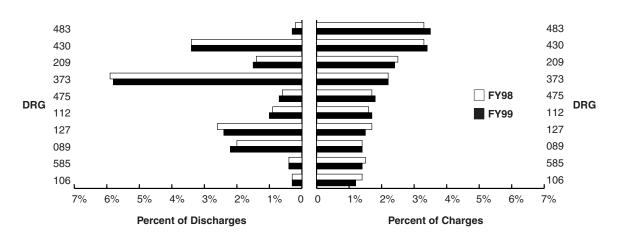
Division of Health Care Finance and Policy

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Louis I. Freedman Commissioner

Number 5 FY98 and FY99

Copyright © May 2000 Division of Health Care Finance and Policy Top Ten DRGs Ranked by Percent of Charges



Note: See table below for DRG labels. DRGs are based on the 3M All-Patient Grouper, version 12, and ranked according to percent of total charges for FY99.

New!

This special issue of *Datapoint* compares two full years of data. Look for the data behind *Datapoint* on the DHCFP web site.

What is Datapoint?

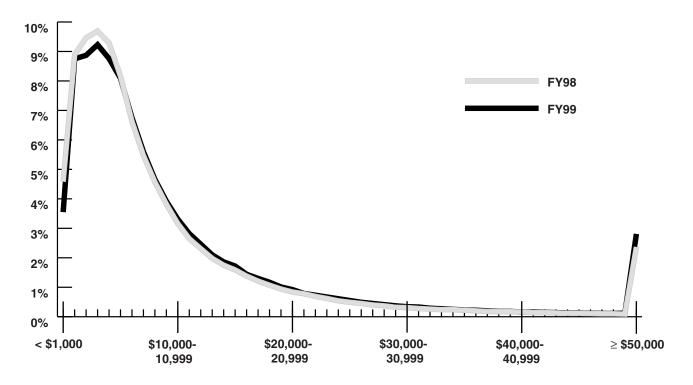
Datapoint is a quarterly publication that highlights the most current information available about the Massachusetts short stay acute care hospital industry. To obtain additional copies, please call the Division of Health Care Finance and Policy Office of Communications at (617) 988-3125. To share your comments and suggestions for future editions, or to discuss technical questions, please contact Bennett Locke at (617) 988-3144 or by email at ben.locke@state.ma.us.

Mean Charges per Discharge and Length of Stay for Top Ten DRGs

		Mean Charges per Discharge		Mean LOS	
DRG		FY98	FY99	FY98	FY99
483:	Tracheostomy except for face, mouth and neck diagnoses	\$144,668	\$162,632	35.8	35.8
430:	Psychoses	\$10,391	\$11,317	9.9	10.4
209:	Major joint and limb reattachment procedure of lower extremities	\$18,736	\$19,266	4.5	4.4
373:	Vaginal delivery without complications	\$3,962	\$4,286	2.2	2.2
475:	Respiratory system diagnosis with ventilator support	\$28,279	\$30,752	10.7	10.7
112:	Percutaneous cardiovascular procedure without AMI	\$18,799	\$20,220	2.3	2.2
127:	Heart failure and shock	\$6,944	\$7,225	4.7	4.5
089:	Simple pneumonia and pleurisy age >17 with CC	\$7,515	\$7,683	5.4	5.2
585:	Major stomach, esophageal, duodenal, small and large bowel procedure with major CC	\$42,178	\$45,852	15.2	15.7
106:	Coronary bypass with cardiac catheterization	\$49,545	\$52,830	9.1	9.0

Note: AMI = acute myocardial infarction, CC = complications or comorbidities

Distribution of Total Charges per Discharge

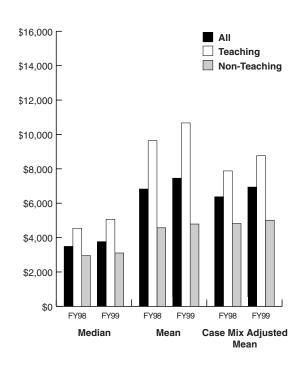


Note: Lines represent percent of discharges in each \$1,000 charge interval.

Total Charges per Discharge

\$18,000 [All Teaching Non-Teaching \$16,000 \$14,000 \$12,000 \$10,000 \$8,000 \$6,000 \$4,000 \$2,000 \$0 FY98 FY99 FY98 FY99 FY98 Median Mean Case Mix Adjusted Mean

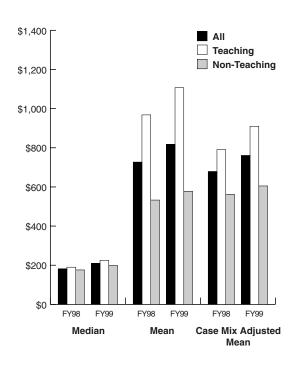
Ancillary Charges per Discharge

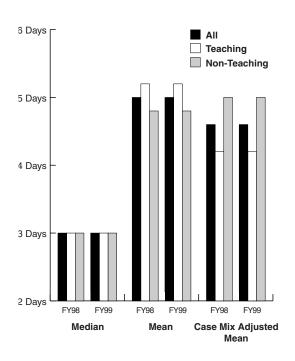


Note: Ancillary charges include all charges except those for routine and special accommodations.

Pharmacy Charges per Discharge

Length of Stay

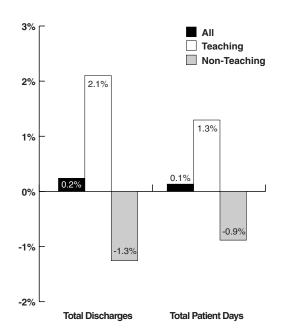




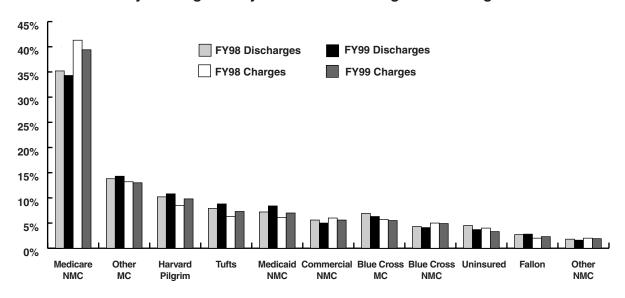
Case Mix Index

1.3 FY98 FY99 1.22 1.22 1.2 Case Mix 1.1 Index 1.07 1.0 0.95 0.9 ΑII Teaching Non-Teaching

Percent Change in Discharges and Days (FY98 to FY99)

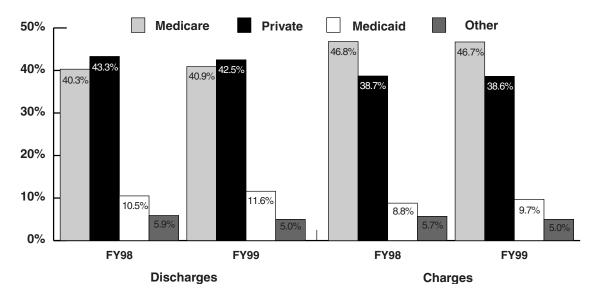


Payer Categories by Percent of Discharges and Charges



Note: Ranked by percent of total charges statewide FY99. MC = managed care. NMC = non-managed care. "Other MC" includes Health New England, US Healthcare, Medicaid primary care clinician, Massachusetts Behavioral Health Partnership, other HMOs, PPOs, and POSs. "Other NMC" includes: Workers' Compensation and other government payment.

Government and Private Payers by Percent of Discharges and Charges



Note: "Other" includes workers' compensation and other government payment.

Endnotes

Statistics for FY99 (10/01/98 to 09/30/99) are based on short stay acute hospital inpatient discharge data received as of 04/12/00; some data that failed DHCFP edits have been included. Data from 81 hospitals open during part or all of this period are included in this FY98 to FY99 comparison. This includes data from 19 teaching hospitals and 62 non-teaching hospitals. The statistical tables used to create this issue of *Datapoint* are available on the DHCFP web site:

The following hospitals are categorized as teaching hospitals: Baystate Health Systems, Berkshire, Beth Israel Deaconess, Boston Medical Center, Brigham and Women's, Cambridge, Carney, Children's Medical Center, Dana Farber, Faulkner, Lahey Clinic, Mass. Eye and Ear, Mass. General, Memorial Health Care, Mount Auburn, New England Medical Center, St. Elizabeth's, Saint Vincent, University of Massachusetts Medical Center.

Charges are not inflation-adjusted and do not represent costs or payments.

Case mix index is calculated using Massachusetts cost weights (base year = FY93) for the 3M All-Patient Grouper, version 12.

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